

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490





Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545-0052

2009

Department of the Treasury Internal Revenue Service Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements , 2009, and ending For calendar year 2009, or tax year beginning G Check all that apply. Initial return Initial Return of a former public charity Final return Amended return Address change Name change Employer identification number Use the THE TRUE NORTH FOUNDATION IRS label. 20-4877644 C/O AMY BROWN NORTH Otherwise, В Telephone number (see the instructions) print PO BOX 18 or type. See Specific CURRIE, NC 28435 If exemption application is pending, check here Instructions **D** 1 Foreign organizations, check here . 2 Foreign organizations meeting the 85% test, check X Section 501(c)(3) exempt private foundation Check type of organization here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated J Accounting method X Cash Fair market value of all assets at end of year Accrual under section 507(b)(1)(A), check here (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination 1,291,192. (Part I, column (d) must be on cash basis.) under section 507(b)(1)(B), check here Part I Analysis of Revenue and (a) Revenue and (b) Net investment (c) Adjusted net (d) Disbursements Expenses (The total of amounts in expenses per books income ıncome for charitable columns (b), (c), and (d) may not necessarily equal the amounts in column (a) purposes (cash basis only) (see the instructions)) Contributions, gifts, grants, etc, received (att sch) 254,799 Ck ► If the foundn is **not** reg to att Sch B Interest on savings and temporary 16 16 cash investments 16 13,912 13,912 13,912 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) -12,692 REVENU 6a Net gain/(loss) from sale of assets not on line 10. b Gross sales price for all assets on line 6a 56,679 0. Capital gain net income (from Part IV, line 2) Net short-term capital gain 0 Income modifications 10a Gross sales less returns and allowances **b** Less Cost of goods sold c Gross profit/(loss) (att sch) 11 Other income (attach schedule) . Total. Add lines 1 through 11 256,035 13,928 13,928 SCANNED MAY 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) . **b** Accounting fees (attach sch) See St 1 1,701 851. 850 c Other prof fees (attach sch) 17 Interest 335 18 Taxes (attach schedule)(see instr.) See Stm 2 Depreciation (attach sch) and depletion 20 Occupancy Travel, conferences, and meetings 21 Printing and publications EXP 23 Other expenses (attach schedule) See Statement 463. 24 Total operating and administrative <u>2,</u>499 851. 850. expenses. Add lines 13 through 23 Contributions, gifts, grants paid Part XV 44,001 44,001. 27 Total expenses and disbursements.

Add lines 24 and 25

27 Subtract line; 26 from line 12:

a Excess of revenue over expenses

and disbursements

b Net investment income (if negative, enter -0-) RE 46,500 851 0 44,851 209,535 AM 13,077 13,928. G-Adjusted net income (if negative, enter -0-) Form 990-PF (2009) BAA For Privacy Act and Paperwork Reduction Act Notice, see the instructions. TEEA0504L 02/02/10

Part	11	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only		Beginning of year	End o	
rait	24	(See instru	octions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing				
	2	Savings and temporary cash	investments .	209,752.	332,502.	332,502.
	3	Accounts receivable	-			
		Less: allowance for doubtful	accounts 			
	4	Pledges receivable	-			
		Less: allowance for doubtful	accounts >			
	5	Grants receivable			· - · · · · · · · · · · · · · · · · · ·	
	6	Receivables due from officers, direction disqualified persons (attach schedule	ors, trustees, and other e) (see the instructions)			
	7	Other notes and loans receivable (att	ach sch)			
S		Less allowance for doubtful	accounts >			
A S S E T	8	Inventories for sale or use	• • •			
	9	Prepaid expenses and deferr	ed charges			
S		 Investments – U.S and state obligations (attach schedule). 				
		Investments — corporate stock (atta		132,970.	65,992.	722,029.
	•	c Investments — corporate bonds (atta	ich schedule)			
	11	Investments – land, building equipment, basis	s, and			
		Less: accumulated depreciation (attach schedule)	-			
	12	Investments – mortgage loai	ns.			
	13	Investments - other (attach	schedule) Statement 5	300,000.	300,000.	236,661.
	14	Land, buildings, and equipment	t basis ▶			
		Less: accumulated depreciation (attach schedule)				
		Other assets (describe ►)			
	16	Total assets (to be complete see instructions. Also, see page 1	ed by all filers — age 1. item I).	642,722.	698,494.	1,291,192.
L	17	Accounts payable and accrue		2,834.	2,834.	
Ĭ	18	Grants payable	•		41,100.	[
A B	19	Deferred revenue			•	
ŀ	20	Loans from officers, directors, truste	es, & other disqualified persons			
Ī	21	Mortgages and other notes payable (attach schedule)			
-	22	Other liabilities (describe)			
E S	23	Total liabilities (add lines 17	through 22)	2,834.	43,934.	
<u> </u>	23	Foundations that follow SFA		2,034.	15, 551.	l l
		and complete lines 24 throu				
N F E U T N	24	Unrestricted	•	-		
TND	25	Temporarily restricted Permanently restricted				1
	26	-	ow SFAS 117, check here ► X	1		1
A B A L A		Foundations that do not foll and complete lines 27 throu	gh 31.			1
FA	27	Capital stock, trust principal,				
SNC	28	Paid-in or capital surplus, or land, b	=: · · ·			1
OE	29	Retained earnings, accumulated inco		639,888.	654,560.	
RS	30	Total net assets or fund bala		639,888.	654,560.	
	31	Total liabilities and net asse (see the instructions)	ets/fund balances	642,722.	698,494.	ŧ.
Part	Ш		Net Assets or Fund Balance		<u> </u>	
			at beginning of year – Part II, color year's return).		gree with	
						639,888.
_		er amount from Part I, line 27a			2	209,535.
3		increases not included in line 2 (itemi	ze)		3	040 400
4		lines 1, 2, and 3			4	849,423.
5		eases not included in line 2 (itemize)	. ► See Statement		5	194,863.
6_	Tota	I net assets or fund balances	at end of year (line 4 minus line 5) – Part II, column (b), I	ine 30 6	654, <u>560.</u>

BAA

Form **990-PF** (2009)

Part IV	(a) List and describ	Losses for lax on Investmen the kind(s) of property sold (e.g., rese; or common stock, 200 shares ML	eal estate.	(b) How acquire P — Purchas D — Donatio	e (month, day, year)	(d) Date sold (month, day, year)
1a Se	ee Statement 7					
b						
c		<u> </u>				_
d						
<u>e</u>			4.50		420	(1)
·········	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other base plus expense of sa		(h) Gain or (e) plus (f) m	(IOSS) ninus (g)
a						_
<u> </u>						
						
<u>d</u> e						
	mnlete only for assets show	ving gain in column (h) and owned by	the foundation on 12/31/69	,	(I) Gains (Col	uma (h)
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a	(1)	gain minus column (than -0-) or Losses (f	k), but not less
a						
b						
<u> </u>						
						
	ipital gain net income or (ne	et capital loss) If gain, also	enter in Part I, line 7 er -0- in Part I, line 7	-	2	-12,692.
3 Ne	et short-term capital gain or	(loss) as defined in sections 1222(5)		-		12,032.
	, -		_			
	pain, aiso enter in Part I, iin Part I, line 8	e 8, column (c) (see the instructions)	ii (loss), enter -o-	•	3	-4,770.
Part V	Qualification Unde	r Section 4940(e) for Reduce	d Tax on Net Investm	ent Incom	е	
If 'Yes,'	the foundation does not qua	ction 4942 tax on the distributable am alify under section 4940(e) Do not co in each column for each year, see th	mplete this part		Yes (d)	X No
Ca	Base period years lendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use as	sets (Distribution column (b) divided	
	2008	16,452.	63	5,808.		0.025876
	2007	2,620.		2,490.		0.007880
	2006	1,584.	11	7,441.		0.013488
	2005					_
	2004				- T	
2 To	otal of line 1, column (d)				2	0.047244
3 Av	verage distribution ratio for t imber of years the foundation	the 5-year base period — divide the to in has been in existence if less than 5	tal on line 2 by 5, or by the years		3	0.015748
4 Er	nter the net value of noncha	ritable-use assets for 2009 from Part	X, line 5		4	956 <u>,</u> 080.
5 M	ultiply line 4 by line 3			_	5	15,056.
6 Er	nter 1% of net investment in	come (1% of Part I, line 27b)			6	131.
7 Ac	dd lines 5 and 6				7	15,187.
8 Er	nter qualifying distributions f	from Part XII, line 4			8	44,851.
<u>If</u>	line 8 is equal to or greater art VI instructions.	than line 7, check the box in Part VI,	line 1b, and complete that	part using a	1% tax rate. See	the

	n 990-PF (2009) THE TRUE NORTH FOUNDATION 20-4877644		Р	age 4
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see the instruc	tions)		
1 a	a Exempt operating foundations described in section 4940(d)(2), check here ► ☐ and enter 'N/A' on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary - see instr.)			
t	b Domestic foundations that meet the section 4940(e) requirements in Part V,		1	31.
	check here ► X and enter 1% of Part I, line 27b			
C	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			
	foundations only Others enter -0-).			<u>0.</u>
3	Add lines 1 and 2 3		1	.31.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			31.
	Credits/Payments			
	a 2009 estimated tax pmts and 2008 overpayment credited to 2009 6a 143.			
	b Exempt foreign organizations — tax withheld at source 6b			
	c Tax paid with application for extension of time to file (Form 8868)			
	d Backup withholding erroneously withheld			.43.
,	Total ordina and payments read miss and among the		1	.43.
٥	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	-		12.
	Enter the amount of line 10 to be: Credited to 2010 estimated tax			0.
	t VII-A Statements Regarding Activities			<u> </u>
		П	Yes	No
1 a	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	103	X
ŧ	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	1 b		х
	If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials published			
	or distributed by the foundation in connection with the activities		-	
	c Did the foundation file Form 1120-POL for this year?	1c		Х
(d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ►\$ 0. (2) On foundation managers ►\$ 0.			
•	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	1		
	foundation managers \$0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If 'Yes,' attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
_	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	3		X
48	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	b If 'Yes,' has it filed a tax return on Form 990-T for this year?	4b	N.	/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
	If 'Yes,' attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict			
	with the state law remain in the governing instrument?	6	•	X
	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV .	7	X	
8	a Enter the states to which the foundation reports or with which it is registered (see the instructions)			
	NC			
ı	b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation	8b		
				-
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' complete Part XIV	9		X
	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names	10		x

TEEA0304L 07/06/09

Form **990-PF** (2009)

BAA

Form	n 990-PF (2009) THE TRUE NORTH FOUNDATION	20-487764	4	Р	age 5
Par	t VII-A Statements Regarding Activities Continued				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)		11		х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?		12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption	n application?	13	Х	
	Website address ► N/A				
14		e no ► <u>(678)</u>	904	-059	<u>4</u>
	Located at ► 3715 NORTHSIDE PKWY, NORTHCREEK 200 ATLANTA ZIP + 4 ►				
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	1 1	N/A	•	LI A
Day	and enter the amount of tax-exempt interest received or accrued during the year.	▶ 15			N/A
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			Yes	No
1.	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies. a During the year did the foundation (either directly or indirectly)			162	NO
16	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes XNo			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	Yes X No			
ŀ	b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the instruct	ions)?	1 b	N	/A
	Organizations relying on a current notice regarding disaster assistance check here	▶ [
•	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts that were not corrected before the first day of the tax year beginning in 2009?		1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))				
á	a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?	Yes X No			;
	If 'Yes,' list the years ▶ 20 , 20 , 20				1
l	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 494. (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942 all years listed, answer 'No' and attach statement — see the instructions.)	2(a)(2) (a)(2) to	2 b	 N	/A -
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years	here.			
	► 20, 20, 20, 20				
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X No			
ı	b If 'Yes,' did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approve by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009)	n ed 	3b	- N	/A
4:	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		Х
1	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?		 4b		

BAA

Form **990-PF** (2009)

Form 990-PF (2009) THE TRUE NORTH FOU			20-48	77644 Page 6
Part VII-B Statements Regarding Activiti		<u> 4720 May Be Requ</u>	uired (continued)	
5a During the year did the foundation pay or incu	r any amount to·			
(1) Carry on propaganda, or otherwise attempt	t to influence legislatio	n (section 4945(e))?	☐ Yes X	No
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	ic election (see section tion drive?	1 4955), or to carry		No
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	Yes X	No
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, or 4940(d)(2)? (see instri	rganization described uctions) .	. Yes X	No
(5) Provide for any purpose other than religior educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	c, literary, or or animals?	. Yes X	No
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53.4945 or in (see instructions)?	the transactions fail to a current notice regard	qualify under the except ding disaster assistance	tions	5b N/A
Organizations relying on a current notice rega	rding disaster assistand	ce check here .	▶ 📑	
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure response if 'Yes,' attach the statement required by Region 1.	sibility for the grant?	•	N/A Yes	No
6a Did the foundation, during the year, receive are on a personal benefit contract?		•	∐Yes X	No
b Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	ums, directly or indirec	tly, on a personal benef	fit contract? .	6b X
7a At any time during the tax year, was the found	dation a party to a prob	ibited tax shelter transa	ction?. Yes X	No
b If yes, did the foundation receive any proceed				7b N/A
Part VIII Information About Officers, D				
and Contractors				
1 List all officers, directors, trustees, foundation	n managers and their	compensation (see inst	ructions).	Ţ =
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
AMY BROWN NORTH	Trustee	0.	0.	0.
PO BOX 18	1.00			
CURRIE, NC 28435				
DEBERNIA CLINTON NORTH III PO BOX 18 CURRIE, NC 28435	Trustee 1.00	0.	0.	0.
2 Compensation of five highest-paid employee	s (other than those inc	cluded on line 1— see ir	nstructions). If none, e	nter 'NONE.'
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
None			:	
Total number of other employees paid over \$50,00	TEFA03061	. 07/06/09		Form 990-PF (2009)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 2	
2	
2	
2	
All other program-related investments. See instructions.	
3	

Total. Add lines 1 through 3

BAA

0.

Page 8

Pa	Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	reign	foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes a Average monthly fair market value of securities.		070 640
		1a 1b	970,640.
	Average of monthly cash balances	1 D	
	C Fair market value of all other assets (see instructions)	1d	970,640.
	d Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and 1c	10	370,040.
,	(attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	970,640.
_		-	270,040.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	14,560.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	956,080.
6	Minimum investment return. Enter 5% of line 5	6	47,804.
Pa	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations check here ► □ and do not complete this pa		foundations
1	Minimum investment return from Part X, line 6	1	47,804.
2	a Tax on investment income for 2009 from Part VI, line 5		
ı	b Income tax for 2009 (This does not include the tax from Part VI)]	
,	C Add lines 2a and 2b	2c	131.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	47,673.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	47,673.
6	Deduction from distributable amount (see instructions)	6	
	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	47,673.
Pa	rt XII Qualifying Distributions (see instructions)	1 1	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	44,851.
	b Program-related investments – total from Part IX-B	1 b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the assisting the set aside for IRS approval required)	3a	
	b Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	44,851.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions).	5	131.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	44,720.
3	,	ست	· · · · · · · · · · · · · · · · · · ·
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating when qualifies for the section 4940(e) reduction of tax in those years	tner th	e roundation
BA	· · · · · · · · · · · · · · · · · · ·		Form 990-PF (2009)

BAA

Form **990-PF** (2009)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				47,673.
2 Undistributed income, if any, as of the end of 2009			-	47,075.
a Enter amount for 2008 only			31,134.	
b Total for prior years: 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2009				
a From 2004				
b From 2005				
c From 2006				
d From 2007 .		:		
e From 2008 f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from Part				
XII, line 4 ► \$ 44,851.				
a Applied to 2008, but not more than line 2a			31,134.	
			<u> </u>	·- ·-
b Applied to undistributed income of prior years (Election required — see instructions)		0.		
c Treated as distributions out of corpus				
(Election required — see instructions)	0.			
d Applied to 2009 distributable amount				13,717.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2009	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
, , ,				
6 Enter the net total of each column as				
indicated below:	0.			
a Corpus. Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut-				· · · · · · · · · · · · · · · · · · ·
ed income for which a notice of deficiency				
has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line 4a from				
line 2a Taxable amount — see instructions	···		0.	
f Undistributed income for 2009. Subtract lines				
4d and 5 from line 1 This amount must be				22 056
distributed in 2010		<u> </u>		33,956.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
, ,				
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009		<u> </u>		

Form 990-PF (2009) THE TRUE NORTH F				20-487764	
Part XIV Private Operating Foundation					N/A
1 a If the foundation has received a ruling or one is effective for 2009, enter the date of the	ruling .	·		•	-
b Check box to indicate whether the foundate		erating foundation de		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years	1	
investment return from Part X for each year listed	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
b 85% of line 2a .					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities		<u> </u>		:	
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)			<u> </u>		
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization .					
(4) Gross investment income					
Part XV Supplementary Information			organization h	ad \$5,000 or mo	re in
assets at any time during the 1 Information Regarding Foundation Mana		istructions.)			
a List any managers of the foundation who close of any tax year (but only if they hav	have contributed m	ore than 2% of the than \$5,000) (See	total contributions section 507(d)(2).)	received by the foun	dation before the
None					
b List any managers of the foundation who a partnership or other entity) of which the	own 10% or more of	of the stock of a cor	poration (or an equest.	ally large portion of	the ownership of
None		J			
2 Information Regarding Contribution, Gra	nt Gift Loan Sch	plarship etc Progra	ame.		
Check here X If the foundation only requests for funds If the foundation make	makes contributions	s to preselected cha	ırıtable organızatıor	ns and does not acce ganizations under oth	ept unsolicited ner conditions,
complete items 2a, b, c, and d	. 6 11	<u> </u>			<u> </u>
a The name, address, and telephone number	er of the person to	wnom applications !	snould be addresse	ea	
b The form in which applications should be	submitted and info	rmation and materia	als they should incl	ude:	<u> </u>
	•		•		
c Any submission deadlines					
d Any restrictions or limitations on awards,	such as by geogra	ohical areas, charita	ible fields, kinds of	institutions, or other	factors.
		· · · · · · · · · · · · · · · · · · ·			
BAA	TI	EEA0310L 07/06/09		ĺ	Form 990-PF (2009)

Part XV Supplementary information				
3 Grants and Contributions Paid During the Y	ear or Approved for Ful	ure Paymen	t	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient	contribution	
a Paid during the year				-
See Statement 8				
		i		
		ŀ		
			•	
		İ		
		i		
		İ		
		1		
		1		
Total			> ;	3a 44,0 <u>01</u> .
b Approved for future payment				
			1	
Total		<u> </u>	<u> </u>	3 b
i Ulai , , ,	•		, , , , , , , , , , , , , , , , , , ,	Jul

Part XVI-A `	Analy:	sis of	Income-	Producing	Activities

1 Program service revenue a b c d e	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (see the instructions)
b					
b					
c				<u> </u>	
d					
_	ł I				
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments		-			
3 Interest on savings and temporary cash investments			14	16.	
Dividends and interest from securities			14	13,912.	
5 Net rental income or (loss) from real estate				. =-	
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income		<u> </u>			
8 Gain or (loss) from sales of assets other than inventory					-12,692.
9 Net income or (loss) from special events.					
O Gross profit or (loss) from sales of inventory					
1 Other revenue.					
a					
b					
С					
d					
e					
2 Subtotal. Add columns (b), (d), and (e)				13,928.	
3 Total. Add line 12, columns (b), (d), and (e)		<u></u>		13	1,236.
ee worksheet in the instructions for line 13 to verify ca	alculations.)				

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See the instructions)
N/A	

Part XVII	Information Regarding	Transfers To	and Transactions a	and Relationships	With Noncharitable
-	Exempt Organizations				

1 Did th								Yes	No
relatii	ne organization directly or ribed in section 501(c) of t ng to political organization	the Code (other	age in any of the er than section 50	following with any 11(c)(3) organizati	other organizatio	n 527,			
	sfers from the reporting for		noncharitable exe	empt organization	of				
(1) C				Ar and an annual			1a (1)		X
	Other assets						1 a (2)		X
b Other	r transactions								
(1) S	Sales of assets to a nonch	arıtable exem	pt organization				1 b (1)		X
(2) F	Purchases of assets from a	a noncharitabl	e exempt organiz	zation			1 b (2)		X
(3) F	Rental of facilities, equipm	ent, or other a	ssets				1 b (3)		X
(4) F	Reimbursement arrangem	ents					1 b (4)		X
(5) L	oans or loan guarantees						1 b (5)		X
(6) F	Performance of services o	r membership	or fundraising so	licitations			1 b (6)		X_
c Sharı	ing of facilities, equipment	t, mailing lists,	other assets, or	paid employees			1 c		<u> </u>
the go any tr	answer to any of the above oods, other assets, or servansaction or sharing arra	vices given by ngement, sho	the reporting fou w in column (c	indation If the fou d) the value of the	indation received goods, other asse	ess than fair ma ets, or services r	he fair market value rket value in eceived transactions, and sh		
a) Line no	(b) Amount involved	(c) Name	e or nonchantable	exempt organiza	igon (a) Descrip	uon or transfers,	transactions, and sn	aring ar	rangem

						`			
-					-				
	·								
									1
b if 'Ye	e foundation directly or ind ribed in section 501(c) of t s,' complete the following (a) Name of organization	the Code (othe schedule	er than section 50	to, one or more ta D1(c)(3)) or in sect se of organization	ax-exempt organiz		Ye	s X	No
descr b If 'Ye	ribed in section 501(c) of t s,' complete the following	the Code (othe schedule	er than section 50	01(c)(3)) or in sect	ax-exempt organiz			s X	No
descr b If 'Ye	ribed in section 501(c) of t s,' complete the following	the Code (othe schedule	er than section 50	01(c)(3)) or in sect	ax-exempt organiz			s X	No
descr b If 'Ye	ribed in section 501(c) of t s,' complete the following	the Code (othe schedule	er than section 50	01(c)(3)) or in sect	ax-exempt organiz			s X	No
desci	ribed in section 501(c) of t s,' complete the following	the Code (othe schedule	er than section 50	01(c)(3)) or in sect	ax-exempt organization 527?			s X	No
describit Yes	ribed in section 501(c) of the street of street the following (a) Name of organization (a) Name of organization (b) Name of organization (a) Name of organization (b) Name of organization (b) Name of organization (c) Name	the Code (other schedule n	(b) Typ	D1(c)(3)) or in sect	nd statements, and to the	(c) Descrip	otion of relationship		No
describit Yes	ribed in section 501(c) of the street of the following (a) Name of organization (a) Name of organization (b) Name of organization (b) Name of organization (c) Name of organization (d) Name of orga	the Code (other schedule n	(b) Typ	D1(c)(3)) or in sect	and statements, and to the parer has any knowledge	(c) Descrip	ption of relationship	ect, and	
describ If 'Yes' /A Under pen complete Sign Paid	ribed in section 501(c) of the street of street the following (a) Name of organization (a) Name of organization (b) Name of organization (a) Name of organization (b) Name of organization (b) Name of organization (c) Name	the Code (other schedule n	(b) Typ	D1(c)(3)) or in section of organization of which prepared to the prepared to t	nd statements, and to the	(c) Descrip	pe and belief, it is true, come TANTER Preparer's Identif (See Signature)	ect, and	ber
desci b If 'Ye. /A Under pen complete G Sign Paid Pre- parer's	ribed in section 501(c) of of s,' complete the following (a) Name of organization rialities of perjury, I declare that I had beclaration of preparer (other that the declaration of preparer (other that I had beclaration of preparer (other that I had beclare that I had beclare that I had beclared th	the Code (other schedule in ave examined this in taxpayer or fiduce.	return, including accordingly is based on all in	D1(c)(3)) or in section of organization of which prepared to the prepared to t	and statements, and to the parer has any knowledge	(c) Descrip	pe and belief, it is true, come TANTER Preparer's Identif (See Signature)	ect, and	ber
desci b If Ye /A Under pen complete G Sign Paid Pre-	nalties of perjury, I declare that I have been active of officer or fusitee Preparer's signature of officer or fusitee Firm's name (or GULL)	the Code (other schedule in ave examined this in taxpayer or fiduce.	return, including accordingly is based on all in	D1(c)(3)) or in section of organization of which prepared to the prepared to t	and statements, and to the parer has any knowledge Date 3/2	c) Description (c) Description	pe and belief, it is true, correctly preparer's identifications of the structure in the str	ect, and	ber

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF

OMB No 1545-0047

2009

Name of the organization THE TRUE NORTH	FOUNDATION	Employer identification number
C/O AMY BROWN	NORTH	20-4877644
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not tro	eated as a private foundation
	527 political organization	saled as a private loundation
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treate 501(c)(3) taxable private foundation	d as a private foundation
Check if your organization is covered by t Note: Only a section 501(c)(7), (8), or (10)	the General Rule or a Special Rule . I) organization can check boxes for both the General R	ule and a Special Rule See instructions.
General Rule — X For an organization filing Form 990, 9 contributor (Complete Parts I and II)	90-EZ, or 990-PF that received, during the year, \$5,000) or more (in money or property) from any one
Special Rules —		
For a section 501(c)(3) organization fr 509(a)(1)/170(b)(1)(A)(vi) and received fro amount on (i) Form 990, Part VIII, line	lling Form 990 or 990-EZ, that met the 33-1/3% suppor om any one contributor, during the year, a contribution of the e 1h or (ii) Form 990-EZ, line 1. Complete Parts I and I	test of the regulations under sections areater of (1) \$5,000 or (2) 2% of the
	rganization filing Form 990 or 990-EZ, that received fro \$1,000 for use <i>exclusively</i> for religious, charitable, scie ilmals. Complete Parts I, II, and III	
contributions for use exclusively for re this box is checked, enter here the to	rganization filing Form 990 or 990-EZ, that received fro eligious, charitable, etc, purposes, but these contributio tal contributions that were received during the year for parts unless the General Rule applies to this organizat	ns did not aggregate to more than \$1,000. If an exclusively religious, charitable, etc,
religious, charitable, etc, contributions	of \$5,000 or more during the year	. > \$
990-PF) but it must answer 'No' on Part I	red by the General Rule and/or the Special Rules does IV, line 2 of their Form 990, or check the box on line H ie filing requirements of Schedule B (Form 990, 990-EZ	of its Form 990-EZ, or on line 2 of its Form
BAA For Privacy Act and Paperwork Re	duction Act Notice, see the Instructions	Schedule B (Form 990, 990-EZ, or 990-PF) (2009

for Form 990, 990EZ, or 990-PF.

Schedule	B (Form 990, 990-EZ, or 990-PF) (2009)	Page 1	of 1 of Part I
	RUE NORTH FOUNDATION	' -	377644
	Contributors (see instructions)	1====	
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	JANICE H BROWN CLAT IV 3715 NORTHSIDE PKY #200 #600 ATLANTA, GA 30327	\$75,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	JANICE H BROWN CLAT IV 3715 NORTHSIDE PKY #200 #600 ATLANTA, GA 30327	\$179,799.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	 	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution.)
BAA	TEFA0702L 06/23/09	Schedule B (Form 990), 990-EZ, or 990-PF) (2009)

Page

of 1

of Part II

Name of organization

THE TRUE NORTH FOUNDATION

Employer identification number

20-4877644

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	2,920 SHARES PEPSICO INC COMMON		
		\$ 179,799.	12/10/09
(a) lo. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ <u></u> -	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u>-</u>			
		\$	
(a) lo. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
			
		\$	

Name of organization

Employer identification number

THE TRUE NORTH FOUNDATION

Part III | Exclusively religious, charitable, etc, individual contributions to section 501(c)(7), (8), or (10)

(a) p. from Part I	(b)	(c)	(d)		
	Purpose of gift	Use of gift	Description of how gift is he	eld	
	/A				
	,	(e) Transfer of gift			
	Transferee's name, addres		Relationship of transferor to transferee	<u>;</u>	
(a) o. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is he	eld	
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relationship of transferor to transferee		
(a) o. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is he	eld	
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relationship of transferor to transferee		
(a) o. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is he	eld	
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relationship of transferor to transferee		
<u> </u>					
	Transferee's name, addres	Relationship of transferor to transfe	re		

2009	Federal Statements THE TRUE NORTH FOUNDATION C/O AMY BROWN NORTH	Page 1 20-4877644		
Statement 1 Form 990-PF, Part I, Line 16b Accounting Fees				
TAX AND ACCOUNTING FEES	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income \$ 1,701. \$ 851. Total \$ 1,701. \$ 851.	\$ 850.		
Statement 2 Form 990-PF, Part I, Line 18 Taxes				
EXCISE TAXES FOREIGN TAX PAID	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income \$ 300. 35. Total \$ 335. \$ 0.	(d) Charitable Purposes		
Statement 3 Form 990-PF, Part I, Line 23 Other Expenses				
FIDELITY FEES UBS FEES	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income \$ 313. 150. Total \$ 463. \$ 0. \$ 0.	(d) Charitable Purposes \$ 0.		
Statement 4 Form 990-PF, Part II, Line 10b Investments - Corporate Stocks				
Corporate Stocks PEPSICO INC FIDELITY INVESTMENTS UBS FINANCIAL SERVICES	Valuation Book Method Value Cost \$ 1,679.\$ Cost 0. Cost 64,313. Total \$ 65,992.	0. 71,773.		

	_	_
20	m	10
~~		_

Federal Statements THE TRUE NORTH FOUNDATION C/O AMY BROWN NORTH

Page 2

20-4877644

Statement 5 Form 990-PF, Part II, Line 13 Investments - Other

	Valuation <u>Method</u>		Book <u>Value</u>		Fair Market <u>Value</u>	
Other Investments						
MORGAN CREEK FUND LTD	Cost		\$	300,000.	\$	236,661.
		Total	\$	300,000.	\$	236,661.

Statement 6 Form 990-PF, Part III, Line 5 Other Decreases

Basis Adjustment

Total \$ 194,863. \$ 194,863.

Statement 7
Form 990-PF, Part IV, Line 1
Capital Gains and Losses for Tax on Investment Income

		(b) How	(c) Date	(d) Date
Item	(a) Description	<u>Acquired</u>	<u>Acquired</u>	Sold
1	93.115 GMO US QUALITY EQUITY	Purchased	10/09/2008	3/19/2009
2	139.035 LONGLEAF PARTNERS FUND	Purchased	10/09/2008	4/06/2009
3	3,652.578 PIMCO ALL ASSET ALL AUTHORITY	Purchased	12/22/2008	3/26/2009
4	1,018.178 SCHNEIDER SMALL CAP VALUE	Purchased	12/19/2008	3/19/2009
5	327.304 THIRD MILLENIUM RUSSIA FUND	Purchased	Various	3/26/2009
6	204.535 GMO US QUALITY EQUITY	Purchased	2/28/2007	3/19/2009
7	166.049 LONGLEAF PARTNERS FUND	Purchased	2/29/2008	3/26/2009
8	84.286 THIRD MILLENIUM RUSSIA FUND	Purchased	Various	3/26/2009

	(e) Gross	(f) Deprec.	(g) Cost	(h) Gain	(i) FMV	(j) Adj. Bas.	(k) Excess	(1) Gain
<u> Item</u>	Sales	Allowed	Basis	(Loss)	12/31/69	12/31/69	(i) - (i)	(Loss)
1	1,365.	· · · · · · · · · · · · · · · · · · ·	1,507.	-142.				\$ -142.
2	2,287.		2,548.	-261.		(-261.
3	35,854.		37,301.	-1,447.				-1,447.
4	7,073.		8,588.	-1,515.				-1,515.
5	3,476.		4,881.	-1,405.				-1,405.
6	2,998.		4,476.	-1,478.				-1,478.
7	2,731.		5,000.	-2,269.				-2,269.
8	895.		5,070.	-4,175.				<u>-4,175.</u>
							Total	\$ −12,692.

2009

Federal Statements THE TRUE NORTH FOUNDATION C/O AMY BROWN NORTH

Page 3 20-4877644

Statement 8 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant	Amount
CAMP SPRING CREEK 774 SPRING CREEK ROAD BAKERSFIELD, NC 28705	N/A	PUBLIC	GENERAL FUND	\$ 5,000.
GOOD SHEPHERD CENTER 811 MARTIN STREET WILMINGTON, NC 28401		PUBLIC	GENERAL FUND	500.
FRIENDS OF CAMP KIRKWOOD 807 WEST KING STREET ELIZABETHTOWN, NC 28337	N/A	PUBLIC	GENERAL FUND	1,500.
SAFE HAVEN OF PENDER, INC. PO BOX 657, 1411 HIGHWAY 117 S BURGAW, NC 28425	N/A	PUBLIC	GENERAL FUND	500.
LEES-MCRAE COLLEGE 191 MAIN STREET W. BANNER ELK, NC 28604	N/A	PUBLIC	GENERAL FUND	2,500.
FEEDING AMERICA (FOOD BANK OF C&E NC) 3808 TARHEEL DRIVE RALEIGH, NC 27609	N/A	PUBLIC	GENERAL FUND	500.
THE FORREST LANDOWNERS TAX COUNCIL POST OFFICE BOX 784 ALEXANDRIA, VA 22313	N/A	PUBLIC	GENERAL FUND	1,500.
STOKED MENTORING 40 WEST 23RD STREET, 6TH FLOOR NEW YORK, NY 10010	N/A	PUBLIC	GENERAL FUND	1,050.
THALIAN ASSOCIATION 120 SOUTH 2ND STREET WILMINGTON, NC 28401	N/A	PUBLIC	GENERAL FUND	1,000.
WOMEN FOR SOBRIIETY, INC. POST OFFICE BOX 618 QUAKERTOWN, PA 18951	N/A	PUBLIC	GENERAL FUND	2,500.
YAHWEH CENTER CHILDREN'S VILLAGE 5000 LAMB'S PATH WAY CASTLE HAYNE, NC 28429	N/A	PUBLIC	GENERAL FUND	1,600.
WORLD VISION GIFTS POST OFFICE BOX 9716 FEDEERAL WAY, WA 98063	N/A	PUBLIC	GENERAL FUND	1,301.

~~	\sim
* <i>)</i>	нч
	117

Federal Statements THE TRUE NORTH FOUNDATION C/O AMY BROWN NORTH

Page 4

20-4877644

Statement 8 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	An	ount
DREAMS CENTER FOR ARTS EDUCATION 515 ANN STREET WILMINGTON, NC 28402	N/A	PUBLIC	GENERAL FUND	\$	1,500.
HCA 360 TOMAHAWK HIGHWAY HARRELLS, NC 28444	N/A	PUBLIC	GENERAL FUND		2,500.
WHAT 4005 OLEANDER DRIVE WILMINGTON, NC 28403	N/A	PUBLIC	GENERAL FUND		1,000.
WOFFORD COLLEGE 429 N. CHURCH STREET SPARTANBURG, SC 29303	N/A	PUBLIC	GENERAL FUND		1,500.
HISTORIC WILMINGTON FOUNDATION 516 NORTH FOURTH STREET WILMINGTON, NC 28401	N/A	PUBLIC	GENERAL FUND		5,000.
LOWER CAPE FEAR HOSPICE 2222 S 17TH STREET WILMINGTON, NC 28401	N/A	PUBLIC	GENERAL FUND		2,500.
CHILDRENS MUSEUM OF WILMINGTON 116 ORANGE STREET WILMINGTON, NC 28401	N/A	PUBLIC	GENERAL FUND		1,000.
BOY SCOUTS OF AMERICA CAPE FEAR COUNCIL 110 LONESTREET DRIVE WILMINGTON, NC 28412	N/A	PUBLIC	GENERAL FUND		6,500.
WHOR 91.3 FM PUBLIC RADIO 254 N. FRONT STREET, STE. 300 WILMINGTON, NC 28401	N/A	PUBLIC	GENERAL FUND		500.
WRIGHTSVILLE BEACH MUSEUM OF HISTORY 303 W. SALISBURY STREET WRIGHTSVILLE BEACH, NC 28480	N/A	PUBLIC	GENERAL FUND		1,000.
FRIENDS OF TOMS SHOES 3025 OLYMPIC BLVD., STUDIO C SANTA MONICA, CA 90404	N/A	PUBLIC	GENERAL FUND		1,050.

2009

Federal Statements THE TRUE NORTH FOUNDATION C/O AMY BROWN NORTH

Page 5

20-4877644

Statement 8 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant	 Amount
BLUE RIDGE WILDLIFE INSTITUTE 191 MAIN STREET	N/A	PUBLIC	GENERAL FUND	\$ 500.
BANNER ELK, NC 28604				

Total \$ 44,001.